



PATIENT

Lilly Devine

SPECIES

Canine

BREED

Great Pyrenees

SEX

Spayed Female

AGE

6 Years

WEIGHT

52 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Miller

INVOICE

42602

DATE

11/7/22

PRESENTING CLINICAL SIGNS

Presented at our hospital for blood in urine with blood clots/mucous noted. Straining and increased frequency. Previous Health Concerns: uti, Ehrlichia 9/2022 Current Medications: none (doxy and pred following Ehrlichia diagnosis) Appetite/When did they eat last: decreased 3-4 days, yesterday ate 3 cups dry (usual is 4-5 cups/day)

Abnormal PE/Chem/CBC/UA Results: Full BW done 9/2022 was normal except Ehrlichia EPOC today- NR Rad- no obvious bladder/ kidney stones; Fast Scan- thickened, irregular bladder walls(clots? Tumor?) UA- Free catch- (+++) blood, protein(++) trace leukocytes; rbc's;

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented a large amount of dependent debris. Minor amount of sand also noted. The bladder wall itself was unremarkable. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 6.82 cm. The left kidney measured 6.0 cm.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

Spleen

The **spleen** was slightly heterogeneous and folded upon itself cranially. No evidence of significant pathology.

Liver

The **liver** presented minor increased portal markings. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Structurally unremarkable abdomen with bladder debris and sand



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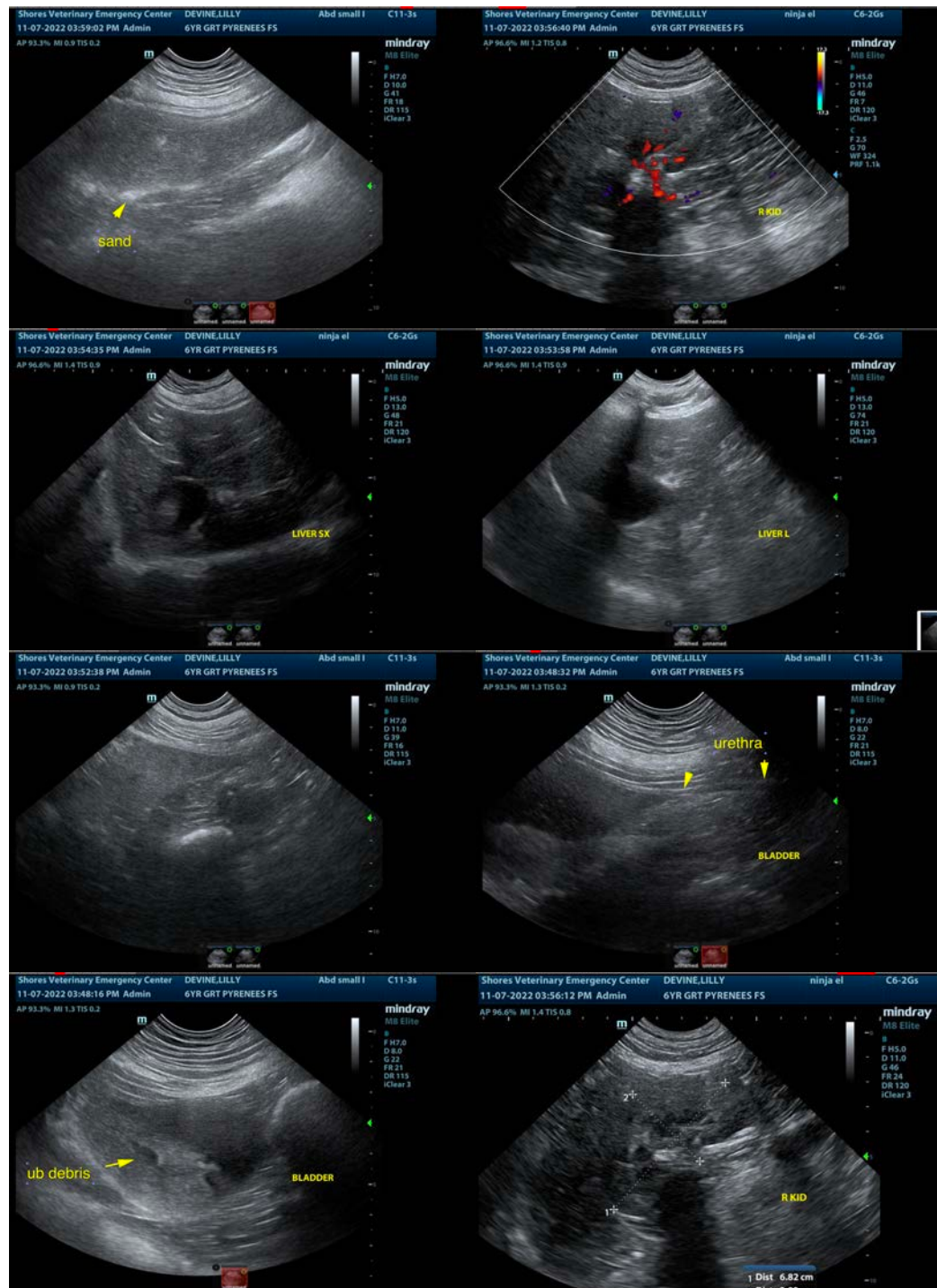
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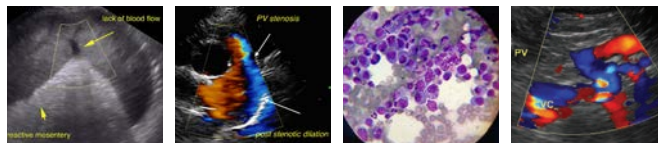
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Underlying UTI likely. Assessment for coagulopathy indicated. Urine culture and sensitivity and full coagulation panel warranted. Any evidence of UTI should be treated for at least 3-4 weeks. Examination of the vaginal vestibule for underlying pathology indicated. No evidence of masses.





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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com

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